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MORS EPIDEMICA.

On Mors Epidemica, or Malignant Asthenia.—Communicated by the Author for publication in the Boston Medical and Surgical Journal.

This functionally diseased state of human organization should have a place assigned it in Nosology.

It may be sufficiently precise, at present, to state that epidemic death, to which millions become victims, is occasioned by great atmospherical vicissitudes, by a vitiated atmosphere, and somewhat rarely by infection or contagion, or by all these causes combined. The symptoms of this mortal state are so rapid as to terminate life in 3, 6, 12, 24, or 48 hours, unless arrested by suitable means.

The subsequent lucid description of this unhappy condition, with trifling alterations, is from the report of Sir William Crichton, physician in ordinary to the Emperor of Russia, in regard to the progress of Epidemic Death, or Cholera Morbus in Russia, until the end of the year 1830.

"General uneasiness, violent headache and giddiness, great languor, oppression at the chest, pain in the pit of the stomach and at the sides, a very weak pulse and frequent vomitings, first of undigested food and then of a watery fluid mixed with phlegm, which may have a rice color, frequent purging, severe pains which make the patient *roll about* and *scream*, cessation or very scanty secretion of urine, excessive thirst, cramp in the legs and by degrees reaching the body, voice feeble and hoarse, the eyes dull or muddy and sunk in their orbits, the features changed, resembling somewhat those of a corpse, coldness, contraction or want of plumpness, a bluish tinge of the extremities, a coldness over the whole body, the lips and tongue become blue and cold, a clammy perspiration. The vomiting and purging, when they do occur, contribute to the exhaustion of the patient.

"The spasms gradually become greater, attacking in succession the most vital parts. The pulse gradually ceases; the respiration becomes scarcely perceptible, and the patient after having suffered a most cruel martyrdom *dies quietly*, having a few moments' ease just before his end. The duration of this unhappy malady is, generally speaking, from twenty-four to forty-eight hours."

Neither the above nor any other excellent description of a set of symptoms can be expected to embrace the history of every case, because the temperament of persons varies very much, as likewise do the remote and exciting causes of epidemics, as regards intensity. Many persons, in epidemic death, or malignant asthenia, become, from torpor, either delirious or comatose; some have dark-colored petechiæ. The vital elements also operate in a morbid manner, in very different organs, in diversified epidemics.

Another abstract view of Mors Epidemica may be given, as it appears in Spotted Fever. The exciting causes having operated, the patient, being somewhat unwell, is suddenly attacked with coldness. This sensation begins at the stomach, quickly extends to almost every part of the system, and is attended with shivering and a general sensation of a chill.* Pungent pain of the head, back, stomach and other parts, is connected with this chill. There soon follows a nameless, dreadful, death-like sensation of the stomach, occurring at intervals, which alarms the patient exceedingly, and often a vomiting of its natural, or unvitiated contents. The respiration is often short, laborious or sighing. The pulse when perceptible is always very feeble, whether fluttering, slow, or somewhat quick. The tongue is more or less bloodless and cold; and when moved, it fumbles about with difficulty; it is sometimes whitish and coated. The throat often becomes aphthous, after being very sore, and so paralytic, or torpid, as to impede deglutition and injure the taste. There is soon a very great diminution of muscular energy, occasioning trembling, feeble movements and a tendency to faintness, spasms, or even a corpse-like rigidity of the limbs. The eyes have a wild, vacant, unanimated, muddy appearance. The tears trickle down the cheeks without consciousness. The eyes sometimes appear somewhat red from a stagnation of blood in their fine vessels. Torpor, coma, or delirium in many forms, and a derangement of the urinary organs, are generally made manifest. There is often a marbled and purplish and cold skin, which sometimes occasions the blood to ooze under the cuticle, forming purplish spots of various sizes and shapes. The bowels are not often diseased, although purging or costiveness sometimes occurs. A warm or wholesome temperature of the whole body is never apparent. There is always the most excruciating general distress. Such dreadful symptoms few can withstand more than twenty-four or forty-eight hours, unless a reaction of the system is artificially produced. When this is done, sweating generally ensues and brings relief. But depletion is injurious.

The sequel to such symptoms, as regards the two epidemics alluded to, if the patient withstands such intense sufferings until a reaction of the organization can take place, is a typhoid state, or speedy convalescence. This also is the case in many other epidemics. This state may sometimes be attended with deep-seated turgescence in important viscera, or typhoid inflammation, and the patient still be in great danger, or he may be in imminent danger from mere exhaustion. Such turgescence may oftener occur in some epidemics than in others. It seldom occurs in

* An inability in our organization to generate, or procure a sufficiency of caloric, is always fraught with imminent danger, and it may be the cause of many symptoms which follow a chill, in some fevers. This fact should teach promptness in action, in such cases.

true Spotted Fever. Morbid anatomy has taught too much error, in regard to common inflammation, as being the cause of very sudden death, in many cases. Such inflammation, unless actual mortification or sphacelus is the result, does not kill immediately. But functional disease often dissipates speedily the fine vital elements of our organization, including the sentient spirit. This state is death. These elements have been often called the vital powers.*

Mors Epidemica is more to be dreaded than any other species of death, because greater terror and more unhappiness is thus occasioned, and in timid individuals a predisposition exists to this disease. It likewise occasions injurious excitements in political governments. Family governments, with proper instruction, can do more to lessen the evils of pestilence than any other. Even the energetic monarchical government cannot control the aerial causes of tempest, mors epidemica, or even contagion, very effectually, unless that of smallpox be an exception. Neither governments nor physicians have the same power over the health or actions of people, that a farmer has over that of his beasts. The latter, but not the former, can execute the best plans for the preservation of his living property.

In such a dreadful malady, as has been had in review, the medicinal treatment, on the one hand, consists in the very vigorous and timely use of both internal and external stimulation, or heating and anodyne agents; and on the other hand, venesection and other depleting remedies should be avoided; so also anything that should excite alarm in the patient. It is feared that these last depressing agents, have been highly injurious to thousands! Venesection should never be resorted to unless by the highly skilful. It may be proper to say that Mors Sporadica, or Sporadic Death, as it occurs to unacclimated Caucasians or the whites in tropical climates, under the name of Yellow Fever, is not meant to be included in our remark in regard to venesection, &c. In full habits it may be proper. There may be other exceptions to the very general sweating plan, which is in review. Great pain alone, and likewise much fear, are both capable of exhausting the fine vital elements of our organization, including the sentient spirit, in a sudden manner, or in a very few hours.†

Powerful anodynes and hope are both needed in such cases. Caloric and oxygen must be supplied to the patient, if deficient. These are known to be vital elements. No great nicety is needed in the use of these last agents, when the patient is in such deplorable circumstances, because when sweating ensues relief is obtained.

The reason why the above somewhat general treatment is suitable *for an infinity of dreadful cases*, is founded on the following fact, viz. the vital vigor of our whole organization, while in health, is in suitable proportion to the quantity of well oxygenized blood, and of that which is sufficiently warm, which quickly circulates through it. A stagnation and thickening of this noble fluid, for want of caloric, oxygen and other suitable aerial elements, and likewise its own highly important vital spirit, is, therefore, to be carefully guarded against or counteracted by suitable

* What these vital powers were, has not been honestly taught *until lately*.

† See North's Essay on Physiology.

means. The latter power is what we may possess as well as the former, and thereby save many lives. Another reason may be given, viz. the best medical experience, in every age and country, has proved, in the writer's deliberate opinion, that stimulant and supporting agents are far more successful than depletion, in counteracting mors epidemica, having no reference whatever in our remarks to the treatment which may be proper for the sequela which may ensue. It may perhaps be an axiom in medicine, that when a sudden and dangerous escape of the fine vital antiseptic elements of our organization is in operation, stimulant and supporting remedies are more or less indicated. The non-professional reader is informed, that these vital antiseptic elements are caloric, oxygen, electricity, light, and the vital molecules, or warm exciting spirit of the blood. The use of cordial and external diaphoretic remedies in that particular state of our organization which has been, in this essay, called mors epidemica, should be regarded as a discovery made, and finished, which is nearly if not quite as useful as vaccination and many other discoveries which have been made in medicine. The warm bath is not the best mode of using external heat. Such a discovery should be extensively promulgated, not because sudden epidemical death can always be prevented by it, but only sometimes, or very frequently.

The horror excited, when such multitudes are thus suddenly carried off, is probably one reason why more die at the commencement of an epidemic than afterwards. This fact should teach discretion. Whenever the Eastern Cholera, the Western Spotted Fever, the Plague, the Yellow Fever, or any other highly malignant epidemy, occurs, in any place, such a state of symptoms as are fraught with imminent and sudden danger should be carefully noticed, and the proper remedies promptly and vigorously applied, at the attack, not waiting too long for the tardy arrival of a physician. Many lives, that are now lost, might without doubt have been thus saved. The after treatment, if the patient survives this dreadful attack, should be directed by a skilful physician, and be done according to the nature of the sequela which may ensue. It may be worth noticing, that the Cholera, or Mort de Chien, has not always been confined to the Eastern Continent. It was witnessed many years ago by British naval surgeons, in South America, and in the West Indies. Neither, in the opinion of the writer, is spotted fever confined solely to North America. It has existed, under a different name, even lately in England.

On the one hand, avoiding fear, pestilential spots of air, when their location may be known, and atmospheric vicissitudes, as much as possible, and also infection and contagion ; and on the other hand, making use of good solid and liquid food or that which may be antiseptic, general temperance in regard to bodily and mental exercise, and in regard to caloric, air or oxygen, and most of our passions, constitute the only preventive means which are known to avoid pestilence. More can be done, however, by these resources, than many are aware.

Housekeepers generally know that the sweating process, if not excessive, is by no means dangerous. If small mistakes are made, the physician, when he arrives, can generally remedy the evil.—Promptness,

in action, in epidemic death, or in malignant asthenia, is as needful as it is in asphyxia, or when persons are dying from wounded arteries. This opinion has not, hitherto, been properly appreciated or attended to by physicians. Nor can it be expected to be by the ignorant. Every family should have some good printed account of mors epidemica, that they may know how to act when pestilence, like a thief in the night, may enter their dwellings. Particular information with regard to particular modes of conducting the sweating process, can be had, having reference to the spotted fever, in North's treatise on Spotted Fever. The professional reader will likewise consult the works of Drs. Nathan Strong, jr. Henry Fish, Benjamin Vaughan, Samuel B. Woodward, Thomas Miner, and many others. An excellent account in regard to Mort de Chien, or Cholera, was published 25 years ago in Edinburgh, by Charles Curtis, Surgeon. He used, vigorously, heating and sweating agents, to both surfaces of the body, i. e. to the stomach and skin. His success was great.* Dr. North has given an account of that heroine in medicine, Mrs. Hurlbut, by whom the sweating process was revived, after it had been almost banished from among physicians by the too great influence of the immortal Sydenham and his disciples, and by morbid anatomy.

The complaints called Cholera Morbus, Spotted Fever, and likewise Yellow Fever, have all of them very deceptive names. The vague term Mors Epidemica, and the more precise term Malignant Asthenia, are therefore used by the writer as a substitute or in a far more general sense. In illustration of this position, the reader is reminded that what in Asia is called Cholera, is not always attended with vomiting and purging. Neither is the spotted fever of America very generally attended with petechiæ or purplish spots; although it may sometimes be so. Nor is yellow fever always attended with a yellow skin.

Some persons may think that it may not be true that such a state of the organization, as has been named Mors Epidemica or Malignant Asthenia, and now partially described, occurs at the attack, in such diversified epidemics as the Cholera of India, the Spotted Fever of America, the sweating sickness of England, the Plague, the Cynanche Maligna, Yellow Fever, malignant intermittents, and other suddenly dangerous fevers. It is admitted, that the diversity of human temperament must somewhat vary the effects which result from remote aerial causes. These causes may vary also. Still it is thought that such an abstract view, as has been taken, may benefit, in times of sickness, non-professional readers—and some professional ones. The plan that has been recommended is not a dangerous one. Sudden death, which sometimes happens from over mental exertions, concussions, &c. may be prevented by the same exciting means, and not by depletion, too often had recourse to. That great solace of life, hope, should be made to move in eddies, in every direction, in times of great terror from Cholera or other dreadful sickness. Suitable instruction in regard to health may annoy the public much less than pestilential evils; and medical men ought to aim to be truth teachers, or shining lights, in society; and they should so teach,

* The knowledge of Dr. Curtis's rare work was obtained after the above was mostly written.

as not to offend, or too much annoy, the organs of self-esteem in others. TISSOT.

PRUSSIC ACID IN HOOPING COUGH.

Observations on the Use of the Hydrocyanic or Prussic Acid in Pertussis or Hooping Cough. By EDWIN P. ATLEE, M. D. of Philadelphia.

THE memoir of Dr. Magendie, of Paris, presented to the Academy of Sciences of that city, November, 1817, on the use of prussic acid in certain diseases, afterwards translated and published in the Journal of the Royal Institution of London, gave origin to numerous experiments, in different parts of Europe, in phthisis pulmonalis, irritable coughs and nervous diseases. It was not, however, until the appearance of his second memoir,* published at Paris, 1819, containing additional researches, physiological and clinical, upon the employment of this powerful agent, that the profession in Europe and America were induced to place much reliance upon its curative influence.

About the time these researches were being made in Europe, the writer of these "observations" was a student of medicine in the University of Pennsylvania, and as additional facts were presented to the professional world through the journals here and abroad, he determined to apply the acid in cases of hooping cough when a suitable opportunity presented. Statements, however, shortly appeared, giving accounts of so many fatal results from its administration under the superintendence of judicious practitioners, that some of his elder and experienced brethren of this city deprecated its use altogether. Thus circumstanced, having just entered upon practice, although his own judgment did not forbid its use under proper regulations, he dared not make an essay.

In the year 1824, however, he had an opportunity of gratifying his wishes in the case of his own child, who, at about eleven months old, was attacked with hooping cough.

Dr. Granville, of England, has reported favorably of the effects of the acid in this disease upon his own children—and believing his report, and feeling myself authorized to administer whatever my judgment indicated to be right to my own child, I gave her the following formula, viz. R. Acid. hydrocyanic, gtt. iv.; syrup. simplic. ℥ij. M. A teaspoonful morning and evening. The second day she took the same quantity three times during the day, and so continued for one week, when she was entirely well. Except a dose of calomel and rhubarb, given previous to the taking of the syrup, she took nothing else.

The decided success in this case induced me to proceed in my experiments. From that time to the present, (3d month, 26th, 1832,) I have prescribed the acid, as hereafter specified, to children, from the age of six months to that of ten, fifteen, and twenty years, and to several adults, amounting in all to more than two hundred cases; the

* "Recherches Physiologiques et Cliniques sur l'Emploi de l'Acide Prussique ou Hydrocyanique," &c.

disease being radically removed in from four to ten days, or at furthest a fortnight.

During the recent prevalence of epidemic influenza, I found that when accompanied by hooping cough, the acid was not efficacious in removing the cough, and evidently increased the catarrhal uneasiness. It was therefore not persisted in.

From the numerous cases in which I have prescribed the acid in hooping cough, and an attentive observation of its powers in this appalling disease, when unattended by any other, I confidently recommend it to the medical profession. In no instance has it proved deleterious to my patients, but rather seems to have destroyed a previous predisposition to croup and catarrh.

The following is the course pursued. During the first, or what may be termed the inflammatory stage of the disease, I resort to the general depletory agents, if called on at all. Usually, however, patients seldom apply for medical advice until the second, or spasmodic stage, or that in which the *hoop* is clearly discerned. If, on inquiry, the bowels have not been freely evacuated, a full dose of calomel and rhubarb, according to the age and condition of the patient, is prescribed. If, to use the common phrase, "the child is much stopped up with phlegm," emesis is produced by antimonial wine, which, when judiciously prepared, I prefer to any other emetic. After this, the syrup is given as follows:—

For a child six months old, one drop of the acid to one ounce of simple syrup. A teaspoonful twice a day. If no uneasiness, dizziness, or sickness is produced within forty-eight hours, the same quantity is given three times a day. From six months to a year, the same may be given four times a day.

From	1	to 2 years of age,	Hydrocyanic acid,	gtt. ij.	syrup, ʒj.
	2	3 do.	do.	iij.	do.
	3	6 do.	do.	iv.	do.
	6	12 do.	do.	v.	do.
	12	15 do.	do.	vj.	do.
	15	20 do.	do.	vij.	do.
	20	30 do.	do.	viij. to x.	do.

A small or large teaspoonful being the dose in each case, repeated as often as close observation of its effects will warrant. I have never yet given it more than four times a day.

Having tried the imported acid, and found it entitled to little reliance, I have for the last six years prescribed that prepared in this city by our judicious chemists, Farr and Kunzi, according to the formula of Mr. Brande. It contains 4½ per cent. of pure prussic acid of Gay Lussac, and is therefore not so strong as that recommended by M. Magendie.

Believing that the acid might be efficacious in spasmodic asthma, I requested my young friend, Dr. Isaac Parrish, late resident student of the Philadelphia Alms-house, to try it. He accordingly prepared the syrup in the proportion of four drops to the ounce, and gave a teaspoonful every two hours, with decided benefit; the patient experiencing great relief in a few hours. This case, he states, had resisted any impression from the other ordinary remedies.

It is not my intention, in the present paper, to notice the statements of several practitioners in different sections of the union, who have, within a few years, administered the acid in hooping cough, because, so far as I have examined their reports, the cases have been but few in which it was fully tried. A number of my brethren in this city and elsewhere, are, at my request, engaged in experiments with the syrup, in pertussis and other affections, from whom I shall, in due season, receive reports; my object at present is only to call the attention of physicians generally to the subject treated of, with the hope that their experience may furnish as pleasant results as my own.

American Journal of Medical Sciences.

SOME CASES OF SPINAL IRRITATION.

To the Editor of the Boston Medical and Surgical Journal.

Sir,—During a few years' practice of the profession of medicine, I have been a pretty constant reader of your valuable Journal. It was through this medium I first learned something of the character of the disease termed *Spinal Irritation*, and to this source am I indebted for the detection and successful treatment of several cases of this disease.

I do not communicate them, with the expectation of casting any additional light, either upon the pathology or treatment of the disease; but with the hope, that by adding well-marked additional cases to those already published, I may do something towards bringing an important disease, hitherto but little attended to, into that notice it seems so highly to deserve.

In the latter part of the year 1830, there came to reside in the sphere of my practice, an unmarried lady of about 25, of rather delicate habit, who, for several years previous, had suffered from a very ill state of health, and for whom I had occasion to prescribe. She had, at different times, been under the direction of several different physicians, and most of the time from the commencement of her illness been subjected to medical treatment, from which she had received no other advantage than a temporary palliation of aggravating symptoms; her primary disease seemed unaffected, and was now, more rapidly than ever, wasting her strength and undermining her constitution. She appeared to have derived no definite idea in regard to the nature or seat of her disease, either from her own observation or from that of her physicians. The obstinacy and permanence of her complaints, led her friends to believe them symptomatic of pulmonary consumption.

Her most prominent symptoms were, pain in the right hypochondriac region, extending through the chest to the left shoulder, great straitness about the præcordia, cough with but little expectoration, dyspnœa, palpitation of the heart, indigestion, distress on taking food, food and medicine often vomited up, bowels costive, catamenia irregular (intervals varying in length from two to eight weeks, at one time deficient in quantity, at another profuse), pain in the head, feet œdematous, much debility, but less emaciation than would have been expected from a review of the

permanence and severity of other symptoms. Pulse rather frequent, but this irregularity bore no proportion to other symptoms.

She had taken the blue pill, by the direction of a former physician; but not knowing to what extent, and strongly suspecting the liver to be the principal organ in fault, I resolved on making another trial of the mercury. Prescribed the submuriate in alterative doses, with such other remedies as the urgency of symptoms demanded. The stomach and bowels were regulated by gentle medicines. Tonics being strongly indicated, were given pretty freely, but all to no purpose.

The failure of my plan of treatment, together with a more intimate acquaintance with the history and present symptoms of the case, led me to doubt the correctness of my opinion, and the submuriate was abandoned. Finding no obvious inconvenience from tonics, they were longer continued, but without any satisfactory effect. Blisters, applied to the side, produced a very partial relief of pain while the irritation was continued, but afforded no permanent relief after their removal. She was subject to severe paroxysms of dyspnœa, with a sensation of faintness, which was very distressing to herself and alarming to her attendants. On such occasions, I was several times sent for in haste, for her friends were apprehensive she was dying.

I could now administer restoratives or palliatives, but had no confidence in any new plan of treatment I could devise for the removal of the disease. There was functional derangement of almost every part of the system—of the organs in the thorax, and of those of digestion and generation; but I was unable to determine which were idiopathically or most deeply implicated in the disease. It seemed that her former physicians had been no less embarrassed than myself; for from what I could learn, the treatment had often been varied, to meet different views of the case, but all to no avail.

I have never been made more sensibly to feel the inefficacy of the healing art, or a want of confidence in my own ability, than when investigating this case. In those diseases that baffle our efforts by their obstinacy or violence, whose character and treatment are satisfactorily indicated, and have been promptly attended to, we can find some degree of reconciliation to the sufferings and threatened fate of our patient; but a lingering disease, involved in obscurity, that mocks every effort of medical skill, is to a physician of common sensibility not only perplexing and discouraging, but painful.

The disquietude the condition of my patient occasioned me, induced me to bestow more than ordinary attention upon her case. I at length imagined I discovered a similarity between her case and a description I had some time previous observed in your Medical Journal, under the title of Spinal Irritation. Upon a close and particular comparison, I found the resemblance remarkably striking. A personal examination with this view confirmed my suspicions.

The fourth and fifth dorsal vertebræ were painfully tender upon pressure. A pretty large sized blister was applied over the tender surface. Its irritation immediately produced, upon a circumscribed surface around it, a large number of *boils*, with a pustular eruption of a smaller size thickly interspersed between them. This served to strengthen my

opinion of the local trouble, and the immediate improvement of the constitutional symptoms convinced me that this was the seat and origin of the whole difficulty.

She had never before been subject to any such cutaneous eruptions. Blisters upon other parts of the body had no such effect. A discharge was kept up some time by blisters, and the symptoms continued to improve. In a few weeks the patient was apparently quite free of her complaints. Some ravages had been made upon her constitution, from the long continuance of the disease; but these, time and the restorative powers of the system have pretty much repaired—far better than I could have expected. She resides near me; I see her frequently; her health, strength, and spirits are quite good, and she calls herself *well*, the first time for many years.—About a year after I first saw her, she had a partial return of the same symptoms, but they were found to proceed from the same cause and readily yielded to the same remedies.

As I made no record of the above case at the time, I have not been able to be definite in regard to dates, which indeed is not essential to my design.

I have since, in two other instances, met with the same disease, of not so long standing, but quite as well developed as the one related. They bore so strong a resemblance to cases already published by Mr. Wark and others, that I consider it unnecessary to relate them in detail. They all three occurred in females, and readily yielded to the remedies prescribed by those writers.

I am fully of the opinion, as the above author observes, (though formed from a limited experience), that were physicians to examine patients with reference to this disease, "there would be no lack of cases of Spinal Irritation."

Very respectfully, yours,

Old Town, Me., May 14th, 1832. JAMES C. BRADBURY, M.D.

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HOURS OF MEALS.

THERE is no one of the innumerable superfluities with which in these degenerate days we are surrounded, that could be retrenched with less real loss than the frequency of our meals. When we compare in this respect our own habits with the extreme degree of luxury attained by the ancients, the difference does not tell remarkably in our favor. The Romans had two meals: the prandium, or breakfast; and the cœna, or dinner, which was the principal. The Greeks had likewise their ariston and deipnon; and it is not intimated that this number was ever exceeded. Indeed, all the references to this subject contained in the classic writers, both medical and general, present a curious contrast to modern notions on the same point, or at least to those which prevail among us. Celsus,

who is extremely liberal in the regimen which he allows to those in health, and who witholds all restriction as to quantity, yet speaks of two meals as the extent, and does not hint at a greater number. A man in health, he says, should shun no kind of food which people generally make use of; should occasionally dine out and indulge freely, or even to excess; should always eat as much as he can digest, and may better take two meals a day than one. But that four meals could ever be needed, does not seem to have occurred to him. We are certainly in this respect the slaves of a pernicious habit. To a man engaged in severe and constant bodily labor, it may perhaps be necessary, and it is certainly not injurious, to take food three times daily; and so far there is nothing in established habit which can be objected against. But to those engaged in professional pursuits, technically so called, or employed in commercial business, two are quite ample. In this respect we see the natural and proper order of things completely reversed. The meals of the higher classes of society, instead of being less numerous than those of the lower, are more so. It is not unusual for breakfast, dinner, tea, and supper, to succeed each other within the space of thirteen hours; and lest the interval between the two first should be excessive, a nondescript repast is interposed to stay the stomach.

Now we do not contend that any serious mischief arises from this cause; that the powers of the stomach are seriously impaired, or that the health really suffers. Habit inures to this as to other violations of the natural order of things; and probably the quantity of food actually taken is not much greater than it would be by a different arrangement. The principal objection to this multiplication of meals beyond what necessity requires, is that they consume time, and make eating and drinking the business of life. There is no doubt that an appetite, or what passes for such, may be called up at intervals even shorter than those at which these meals are accustomed to be taken. A feeling closely allied to that of hunger follows almost immediately upon the digestion of food, and is more certain to be produced where the digestion is imperfect than where this process is duly performed. If the occurrence be noticed and obeyed as the suggestion of hunger itself, meals may be repeated at intervals of less than four hours. If it be neglected, the sensation passes off, and the body is sufficiently well nourished for four hours longer, before any material inconvenience is experienced.

After all, the actual period of the occurrence of hunger depends in a great degree on the manner in which the mind is occupied. The expectation of dinner at a particular hour, will give an appetite; while, on the other hand, if the attention is engaged, fasting may be endured for a long time, even when the body is in a state of exercise, without inconvenience. The sportsman, though he pursue the sport only as an occasional recreation and as interrupting the ordinary routine of business, will easily be

tempted to continue his rambles for eight, ten, or twelve hours, and will scarce be sensible, until his interest in the pastime has flagged, that he has trespassed so much on his usual hour of dining. Whatever strongly fastens the attention, will have the same effect; and nothing can make frequent meals really desirable except the being without any object to occupy and interest the attention.

There can be no doubt that the majority of persons not employed in severe muscular labor, might limit their daily number of meals to two—a breakfast and a dinner—so as to secure a greater amount of personal comfort, and to leave more time for attention to business, than are secured by the present arrangements. There are indeed many who, even while they conform to the present custom, acknowledge its absurdity; and while they go through the ceremony of a morning and evening repast, make dinner their only substantial meal. Nor are we aware that such persons experience any inconvenience from this cause. In fine, this, like all mere personal arrangements, ought to be regulated according to the circumstances of each individual; but it may be considered as a truth fully established by experience, that the number of meals which custom sanctions among us is not rendered necessary by the constitution of our bodies, and was never designed by nature. In this, even the savage may read a lesson to the civilized man, since what the former does from necessity and as a consequence of the uncertainty of his supplies, the latter may imitate in a degree according to the dictates of an enlightened philosophy.

There is one other point in regard to which we are satisfied that a mistake exists with many; namely, the advantage to be derived from the frequent use of animal food. Many persons, leading lives comparatively sedentary—that is, unattended with severe labor—imagine it for their advantage to eat animal food twice or even three times daily, under the idea of increasing thereby the muscular strength. It is extremely doubtful, however, whether this effect follows, and whether the system is as well nourished when so large a proportion of the food taken is animal. The hollow feeling of which we have spoken, and which is mistaken for hunger, follows much sooner and more certainly where meat is taken, than where it is not; and where the digestion is not strong, a breakfast of vegetable diet will keep off unpleasant sensations for a longer time than one of animal food. The idea of the necessity of taking animal food twice daily, may therefore very fairly be set aside; and the question as to its use or neglect being one to be decided by the inclination which precedes and the effects which follow, we believe if attention were paid to these that many more would find it their choice to breakfast with Pythagoras, and save their appetites for an Epicurean dinner. *Sat verbum sapienti.*

THE HEALTHINESS OF DIFFERENT TRADES AND PROFESSIONS.

Medical men are frequently called on by reflecting parents, to decide on the effect of an anticipated occupation of a son or daughter, upon the bodily health. We say by *reflecting* parents, because none but the thoughtless would advise a child to any mode of procuring a subsistence on the sole ground of its pecuniary promise. The moral tendency of the proposed employment, the associates with which it will necessarily bring one in contact, and the effect of its pursuit on the constitution, will be weighed deliberately and advisedly by the wise parent; and the part the physician has in enlightening his mind on this oft-times difficult and always responsible question, is altogether too important to be acted without due examination and serious thought. We propose, therefore, in future numbers of this Journal, to offer some practical remarks on this subject, and embody most of the facts, which are desirable to be known, that have come to light in the course of its recent investigation.

The modification in diseased states of the system, induced by the habitual employment of the patient, and its bearing on the courses to be pursued in the restoration of health, will render this inquiry doubly useful to every active practitioner.

SCARLATINA.

We are happy to find that the scarlet fever, which has prevailed the past year with great fatality in this city, begins to decline. The last two or three weeks there appear to have been but few bad cases, and most of those we have seen have been such as were usually met with in former years. Feeble, however, are the hopes that may be reasonably indulged of its continuing thus mild for many weeks. There is a character of malignity about most of the epidemics which have recently prevailed, both in the new and old world, that indicates a constitution of the atmosphere under which we can expect little immediate amelioration in the symptoms of disease.

Although new cases are mild, many instances have come to our knowledge of sudden death from effusion into important cavities, during convalescence. A remarkable instance was that of a boy three years old, who went through the scarlet fever without any unusual occurrence. A week after he was considered well, the medical attendant remarked, when on a visit to another member of the family, how well this boy appeared, and all the friends supposed him to be growing fat. After playing about the house all the forenoon, he was attacked suddenly about 1 o'clock, P. M. with difficulty of breathing, tumefaction of the abdomen and the extremities, and other symptoms of effusion of water into the thorax, abdomen, and cellular membrane. The intellect and speech were unaffected. The dyspnœa increased rapidly. The face and neck

presented an aspect which indicated a very imperfect arterialization of the blood, and death closed the scene before the following morning.

This instructive case shows with how much caution we should give our prognosis in cases of this description; and we refer the reader to the excellent work of Dr. Dewees for some very important lessons on this interesting topic.

Analysis of the Blood taken from a Patient affected with Cholera.—Dr. Reid Clanny has communicated to the editor of the *London Lancet*, the following interesting analysis of the blood drawn from a patient affected with cholera. The blood was detracted five hours after the invasion of the disease. The disease proved fatal in seventeen hours.

This blood, on applying the tongue to it, Dr. C. says, had no taste, nor any particular smell, as was equally the case with the coloring matter, the albumen, and the fibrine. It contained no gases of any description; was as black as tar.

For comparison, Dr. C. gives the analysis of the blood of a healthy person. This last contained one cubic inch of carbonic acid in the sixteen ounces.

	Healthy blood.	Cholera patient.
Water	756	644
Albumen coagulated	121	31
Coloring matter	59	253
Free carbon	32	66
Fibrine pressed and dried	18	6
Muriates of soda and potass, carbonate of soda and animal extraction	14	0
	1000	1000

Seat of Hydrocele in Women.—The *Archives Générales*, for July last, contains a translation of an interesting memoir by Dr. Sacci, which originally appeared in the *Annali Universali* for March, 1831, on hydrocele in women, a disease of rare occurrence, but which is mentioned by writers on surgery. Dr. S. asserts that he is satisfied that the opinions hitherto entertained respecting the seat of that disease are erroneous; and he remarks that it is not very unusual to meet in women with an appendix of the peritoneum analogous to that which accompanies the testicle in men, and that it is in this prolongation that the serosity which afterwards constitutes the hydrocele is first contained.

Rare Luxation of the Patella.—Dr. Martin has communicated to the Medical Society of Lyons an instance of luxation of the right patella, the inner edge of which bone was in contact with the anterior and middle portion of the articular surface of the femur, its external edge projecting anteriorly. It occurred in a young lady, fifteen years of age, whilst turning in her bed. Dr. M. reduced the luxation by flexing the thigh on the abdomen, and then seizing the patella with both hands, and drawing it outwards turned it back to its natural position. The patellæ in this subject were small, and the ligaments somewhat relaxed.—*Arch. Gén.*

Some surgeons have denied the possibility of such a luxation. Jean

Sue, however, communicated to the Royal Academy of Surgery, in 1752, an instance of it, and another case is recorded by Dr. Wolff, in Rust's Magazine for 1828, B. 27.—*Ibid.*

Treatment of Burns.—M. Roche has employed cold water as an application to burns, and has found it to calm promptly the excessive pain produced by these injuries. But when burns are very extensive it would be difficult to keep the patient constantly in cold water, and the prolonged application of that remedy would also be productive of considerable inconvenience. The pains, however, M. R. says, may in such cases be perfectly removed by the application, for two or three hours, of ice to the head. M. Lombard has been led to adopt this mode of treatment from the great advantages he has derived from it in neuralgiæ wherever they may be seated; and he employs it successfully to calm all intense pains. —*Transactions Médicale.*

Excision of the Elbow Joint.—This operation has been performed by David Kerr, Esq. of Aberdeen, upon a boy sixteen years of age, who had a disease of the elbow joint of ten months' standing. The patient was in a fair way of recovery.—*Ed. Med. and Surg. Journ.*

Nocturnal Emissions of Semen.—Professor Bangs, of Copenhagen, strongly recommends for the cure of this affection the muriated tincture of iron.

Dr. Cless states that he has employed the cubebs with advantage for the relief of that discharge.—*Nova Acta Regiæ Soc. Med. Havn.*

Sulphur as a Preservative against Measles.—Dr. Tourtual, a Dutch physician, states, that at a period when measles were epidemic, all the children who were under treatment with sulphur for itch escaped the disease; and that those who were taking sulphur for the cure of hooping cough enjoyed the same immunity. Finally, he says that many children who were given a mixture of sulphur and camphor, and to whom these medicaments were applied by frictions, were not attacked with measles, whilst those who were not subjected to that medication were affected.—*Kleinert's Repertorium, and Gaz. Médicale.*

Cephalalgia cured by the External Application of Cyanuret of Potassium. —M. Andral has employed the cyanuret of potassium with complete success in a case of most intense cephalalgia, which had resisted for ten months the most powerful remedies (bleeding and seton in the neck, blisters and sinapisms). The salt was employed in solution in the proportion of from six to eight grains to the ounce of distilled water, and compresses wet with this solution were applied for eight days to the forehead and temples.—*Gaz. Méd.*

Hysteria.—Professor Chiappa states, that enemata of iced water immediately dissipate the symptoms which characterize the hysteric paroxysm. —*Annali Universali.*

Nephritic Colic.—Dr. Dubla relates in the *Osservatoire Med.* for July, 1831, two cases of nephritic colic relieved by frictions over the regions of the kidneys and ureters, with an ointment composed of fifteen grains of extract of belladonna and half an ounce of lard. Dr. D. resorted between the frictions to the warm bath.

Connecticut Medical Society.—At a meeting of the Medical Society of Connecticut, in Convention, at New Haven, May 9th, 1832, the following were the officers elected for the present year:

President.—William Buell, M.D.
Vice President.—Thomas Miner, M.D.
Treasurer.—Joseph Palmer, M.D.
Secretary.—Charles Hooker, M.D.

The Cholera appears by the last advices from Europe to be feeding itself to repletion in Paris. In the 24 hours ending at noon, on the 7th of April, there were reported 717 *new cases*, of which 470 were in males and 247 in females. The *whole number* of cases in Paris up to the above date, was 3077, and of deaths 1199. The only person of note who is said to have suffered from the disease, is M. Casimir Perrier, the prime minister of France. He was attended by Drs. Emery and Broussais, who had twice applied leeches—of course. Their distinguished patient was not considered out of danger, though the symptoms of his disease had somewhat abated.

In London, the cholera continues to subside. On the 10th ultimo, but 39 cases were reported and 28 deaths. In other parts of the kingdom there were reported but few cases, and those not very fatal. The Faculty in England, having exhausted every other topic for discussion and dispute relative to the disease, are driven at last to the question, whether or not the true cholera has been in any part of Great Britain. The negative is supported with considerable earnestness.

We acknowledge the receipt of Gooch on the Diseases of Females, Dr. Henderson's Address, and the treatise on Medical Reasoning; each of which will be more particularly noticed next week.—The communication this day published under the signature of Tissot, is from the pen of a physician of long experience, and an author of considerable note, who chooses to withold his name from the paper, but has authorised us to give it to any one who may desire it.—The valuable essay on *Sanguinarine* and its salts, and the remarks on Scarlatina, came too late for the present number.

Whole number of deaths in Boston for the week ending May 19, 41. Males, 24—Females, 17.
Scarlet fever, 4—throat distemper, 2—consumption, 4—measles, 6—unknown, 4—paralysis, 1—infantile, 2—dropsy on the brain, 3—teething, 2—mortification, 1—dysentery, 1—inflammation in the bowels, 1—rupture of a blood vessel, 1—disease of the head, 1—dropsy, 1—scald, 1.

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NEW MEDICAL WORK.

CARTER & HENDEE have this day received, An Account of some of the most important Diseases peculiar to Women. By Robert Gooch, M.D., Author of a Practical Compendium of Midwifery. In 1 vol. 8vo.

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